

Atrio Health Plans H3814
Full Dual-Eligible Special Needs Plan

Model of Care Score: 90.63%

3-Year Approval

January 1, 2012 – December 31, 2014

Target Population

ATRIO Health Plans are Medicare Advantage Organizations (MAO) that operate in Douglas and Klamath Counties within the State of Oregon. To qualify for ATRIO's Dual Eligible Special Needs Plan (D-SNP), a member must: live in the service area, have both Medicare Part A and Part B and qualify for full Medicaid benefits. These members fall into the Full Benefit Dual Eligible (FBDE), Qualified Medicare Beneficiaries Plus (QMB Plus) or Specified Low-Income Medicare Beneficiaries Plus (SLMB Plus) eligibility categories for Medicaid.

ATRIO's dual eligible population is made up of 53% of members who qualify for Medicare due to a disability. The remaining 47% of members qualify for Medicare based on their age. ATRIO contracts with Cascade Comprehensive Care (CCC) and Douglas County Independent Physician Association (DCIPA) to coordinate the Medicare and Medicaid coverage for its dual eligible members. CCC and DCIPA have a Medicaid contract with the State of Oregon to provide Medicaid coverage in their respective counties (CCC-Klamath, DCIPA-Douglas). Of the approximately 1,990 members in ATRIO's D-SNP plan, 33% of them reside in Klamath County and 77% reside in Douglas County.

Provider Network

ATRIO contracts with a network of providers that correspond to the SNP population and include medical facilities and providers to meet the specialized needs of members. To accommodate member needs, ATRIO contracts with durable medical companies, home health agencies, dialysis and chiropractic providers, due to increasing need for options related to these types of providers from its membership. ATRIO's network also contains mental health and substance abuse providers to accommodate the needs of D-SNP members who use a higher percentage of these services. Since the Medicaid providers (DCIPA and CCC), do not have an adequate number of these types of providers in their networks for the D-SNP members, ATRIO also contracts with these providers directly. This significantly increases access to both mental health and substance abuse providers. These providers improve access and availability for these services for members.

Care Management and Coordination

ATRIO uses a health risk assessment (HRA) to evaluate medical, psychosocial, functional and cognitive needs as well as medical and mental health history. The HRA contains information used in the development of an individual care plan (ICP) for all members. A nurse case manager initially drafts the care plan based on available data within the electronic health records system.

Members determined to be high risk are contacted by the nurse case manager who describes available case management services and asks if the member would like to participate. Nurse case managers also develop an initial plan of care, incorporating member input from the initial contact. Nurse case managers may also solicit input for the initial plan of care from selected interdisciplinary care team (ICT) members based on a member's unique needs. Based on the data sources, the nurse case manager finalizes the individual care plan and mails it to the member and his/her primary care provider.

The care plan helps determine the composition of the ICT. Nurse case managers are responsible for forming an ICT for each participating member, while considering the individual needs and appropriate specialists. ATRIO has an established panel of specialists that includes a pharmacist, social services expert, behavioral health clinician and plan medical directors from which the nurse case manager can select for the member's ICT. In addition, the nurse includes each member and his/her primary care provider as an ICT participant. The ICT may also include individuals not on the panel such as: clergy members, care takers or friends of the member; however, at minimum, each ICT must have a nurse case manager, primary care provider and the member.

This MOC summary is intended to provide a broad overview of the SNP's MOC. Although the full extent of any MOC cannot be conveyed in a short summary, this summary provides the reader with a general overview of how the SNP addresses member needs.

For more information about this health plan refer to the Special Needs Plan's website at:

<http://www.atriohp.com/>